

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | M        | 10911  | 08/29/01 |
| RESPONSE FORMALITY REVIEW | TR       | 501113 | 10       |
|                           | 109      | 50906  | 12/11/01 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 3/14/03 |
| 2              | 2/21/03 |
| 3              | 2/21/03 |
| 4              | 2/21/03 |
| 5              | 2/21/03 |
| 6              | 2/21/03 |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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